

Adult Program Trip Raleigh, NC Trip Tuesday, April 5, 2016

Do you enjoy exploring new places? Then join us on this trip to some interesting City of Raleigh sites you may not have experienced yet. We will be leaving from Anne Gordon Active Adult Center at Millbrook Exchange Park (1901 Spring Forest Road) at 8:45am.

Ever wonder what happens to all the recyclable materials once crews collect them from your home? Get your questions answered on a guided tour of the Sonoco Recycling sorting facility, where all the materials are sorted both by people and machines. Our next guided tour is the Wilders Grove Solid Waste Services Facility, a LEED Platinum-certified site featuring geothermal energy and solar panels. The group will have lunch on your own downtown in the City Market area. A tour of the City of Raleigh Museum is next. We'll hear the history of the Briggs building and then tour the many, always changing exhibits on your own. There will be a new exhibit by Meredith College in honor of their 125th anniversary. Our last stop will be a tour of the beautiful Joslin Gardens, recently donated to the City of Oaks Foundation for preservation. In the future it will become a public garden that welcomes all visitors to enjoy what the Joslins spent more than 60 years creating. The Joslin Gardens paths are not handicap accessible, making them unsuitable for wheelchairs or walkers.

We always encourage participants to wear comfortable walking shoes and clothing. The group will arrive back at the Anne Gordon Center in Raleigh at approximately 4:30pm.

Price:

\$20.00 City of Raleigh Resident

\$35.00 Non-City of Raleigh Resident

Price Includes:

Transportation via departmental bus and tours at Sonoco Recycling, Wilders Grove Solid Waste Services Facility, City of Raleigh Museum and Joslin Gardens.

Patron Expectations:

This trip has a moderate/high volume of walking expected, including some steps, and uneven paths with loose bricks and gravel. Patron must be able to keep to the scheduled timeline of the trip. Please remember there is no one-on-one assistance provided by the escorts.

Cancellation Policy:

Cancellations must be made in writing at least 14 days prior to trip departure date to receive a refund. Full or partial refunds will be made only if a replacement can be found, and are subject to non-refundable expenses incurred by the Department. If the Department cancels a trip, a full refund will be given.

To register return the bottom portion of the back page with payment to:

Anne Gordon Center for Active Adults

Adult Program

1901 Spring Forest Road

Raleigh, NC 27615



Five Point Center 919-996-4730 Anne Gordon Center 919-996-4720

Walnut Terrace Center 919-996-6160



Price:

\$20.00 City of Raleigh Resident

\$35.00 Non-City of Raleigh Resident

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Make checks payable to: City of Raleigh

To Register: Complete the form below and return with full payment to:

Anne Gordon Center for Active Adults

Adult Program

1901 Spring Forest Road Raleigh, NC 27615

For Additional Information Contact: Adult Program Staff at 919-996-4730 or 919-996-4720

Keep top portion for your records

Raleigh, NC Tuesday, April 5, 2016

I understand that participating in the recreational program selected involves risk of injury or illness. These risks include, but are not limited to, inclement weather, accidents while traveling, food related illness, equipment problems or failures, contact with and actions of other participants, spectators, and volunteers, slips/trips/falls, and musculoskeletal injuries, among others. I choose for myself or for my child to participate in the selected programs despite the risks.

By signing the Program Registration form, I acknowledge all risks of injury, illness, death, and property damage, and affirm that I have assumed all responsibility of injury, illness, or death in any way connected with participation in the program. I also agree for myself and for any child participant to follow all rules and procedures of the program and to follow the reasonable instructions of the teachers and supervisors of the program.

In return for the opportunity to participate in this program, I agree for myself and for my heirs, assigns, executors, and administrators to release, waive, and discharge any legal rights I may have to seek payment or relief of any kind from the City, its employees or its agents for injury, illness, or death resulting from this program. If I am registering a child for a program, I agree that I am a parent, legal guardian, or am otherwise responsible for the child whose application I am submitting and that I release, waive, and discharge any legal rights that I may assert on behalf of the child participation in the program. I also agree not to sue the City, its employees, or its agents and agree to indemnify the City for all claims, damages, losses, or expenses, including attorney's fees, if a suit is filed concerning an injury, illness, or death to me or to my child resulting from participation in the program

Signature of participant

Date signed	SIGNATUR	E	SIGNATURE	
Name of Participant	DATE			Room-
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Emergency Contact		Work/Home Phone	Cell	
understand that there is no o	ne-on-one assistance	provided by Raleigh PRCR	Adult Program Staff Ini	itial _{INITIALS}
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NON-DISCRIMINATION POLICY: The City of Raleigh does not discriminate on the basis of race, color, national origin, sex, religion, sexual orientation or disability in employment opportunities or the provision of services, programs or activities. A participant alleging discrimination on the basis of the aforementioned areas may file a complaint with either the Director of Raleigh Parks and Recreation Department or the Office of Equal Employment, US Dept. of the Interior, Washington, DC, 20240. The Raleigh Parks and Recreation Department will attempt to provide reasonable accommodations for program participants when the need or accommodation is requested in advance. To ensure a medically safe and appropriately planned program, please list (optional) any special needs or precautions which may require program accommodations for participation (i.e. visual or hearing impairment, mental or physical disability, heart condition, history of seizures, allergies, communicable diseases, diabetes, hemophilia, asthma, etc.):

Food Concerns